

UNITED STATES BANKRUPTCY COURT
DISTRICT OF _____

IN RE:

DEBTOR: MICHAEL B
JARA CENO JR

CASE NUMBER: 13-18784

JUDGE

CHAPTER 11

DEBTOR'S MONTHLY OPERATING REPORT (INDIVIDUAL)
FOR THE PERIOD

FROM

4-1-16 TO 4-30-16

Comes now the above-named debtor and files its Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and FRBP 2015.

Dated: 6-27-16

MICHAEL M^cCRYSTAL
Attorney for Debtor

Debtor's Address

and Phone Number:

4507 SCHEIDT RD

COPLAND, PA 18037

Tel. 610-442-7829

Attorney's Address

and Phone Number:

2355 OLD POST RD #4

COPLAND, PA 18037

Bar No.

Tel. 610-262-7873

Note: The original Monthly Operating Report is to be filed with the court and a copy simultaneously provided to the United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month.

For assistance in preparing the Monthly Operating Report, refer to the following resources on the United States Trustee Program website,
<http://www.justice.gov/ust/r20/index.htm>

- 1) Instructions for Preparation Debtor's Chapter 11 Monthly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs)

**SCHEDULE OF HOUSEHOLD
CASH RECEIPTS AND CASH DISBURSEMENTS**

	Month	Cumulative Total
CASH - Beginning of Month	APRIL	
CASH RECEIPTS		
Salary or Cash from Business		
Wages from Other Sources (attach list to this report)		
Interest or Dividend Income		
Alimony or Child Support		
Social Security/Pension/Retirement		
Sale of Household Assets (attach list to this report)	1580.00	
Loans/Borrowing from Outside Sources (attach list to this report)		
Other (specify) (attach list to this report)	1500.00	
CHILDREN'S HELP		
TOTAL RECEIPTS	3080.00	
CASH DISBURSEMENTS		
Alimony or Child Support Payments		
Charitable Contributions		
Gifts	80.00	
Household Expenses/Food/Clothing		
Household Repairs & Maintenance		
Insurance	140.00	
IRA Contribution		
Lease/Rent Payments		
Medical/Dental Payments		
Mortgage Payment(s)	3585	
Other Secured Payments		
Taxes - Personal Property		
Taxes - Real Estate		
Taxes Other (attach schedule)		
Travel & Entertainment		
Tuition/Education		
Utilities (Electric, Gas, Water, Cable, Sanitation)		
Vehicle Expenses		
Vehicle Secured Payment(s)		
U. S. Trustee Quarterly Fees		
Professional Fees (Legal, Accounting)		
Other (attach schedule)		
Total Household Disbursements	3805.00	
CASH - End of Month (Must equal reconciled bank statement- Attachment No. 2)		

SUMMARY OF CASH RECEIPTS AND CASH DISBURSEMENTS

Debtor Name: MICHAEL B. JARACENO JR.
Case Number: 13-18784

Note: The information requested below is a summary of the information reported the various Schedules and Attachments contained within this report.

	Month APRIL	Cumulative Total
CASH- Beginning of Month (Household)		
CASH- Beginning of Month (Business)		
Total Household Receipts	3080.00	
Total Business Receipts	6250.00	
Total Receipts	9330.00	
Total Household Disbursements	3805.00	
Total Business Disbursements	5611.00	
Total Disbursements	9416.00	
NET CASH FLOW (Total Receipts minus Total Disbursements)	-86.00	
CASH- End of Month (Individual)		
CASH- End of Month (Business)		

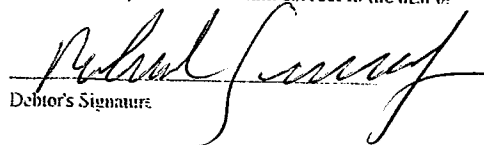
CALCULATION OF DISBURSEMENTS FOR UNITED STATES TRUSTEE QUARTERLY FEES

TOTAL DISBURSEMENTS (From Above)		
Less: Any Amounts Transferred or Paid from the Business Account to the Household Account (i.e., Salary Paid to Debtor or Owner's Draw)		
DISBURSEMENTS FOR U.S. TRUSTEE FEE CALCULATION		

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief

This 27 day of June 2016

Debtor's Signature



**SCHEDULE OF BUSINESS
CASH RECEIPTS AND CASH DISBURSEMENTS**

	Month	Cumulative Total
CASH - Beginning of Month	APRIL	
BUSINESS CASH RECEIPTS		
Cash Sales		
Account Receivable Collection		
Loans/Borrowing from Outside Sources (attach list to this report)		
Rental Income	6250.00	
Sale of Business Assets (attach list to this report)		
Other (specify) (attach list to this report)		
Total Business Receipts	6250.00	
BUSINESS CASH DISBURSEMENTS		
Net Payroll (Excluding Self)		
Salary Paid to Debtor or Owner's Draw (e.g., transfer to Household Account)		
Taxes - Payroll		
Taxes - Sales		
Taxes Other (attach schedule)		
Contract Labor (Subcontractors)		
Inventory Purchases		
Secured/Lease Payments (Business)		
Utilities (Business)		
Insurance		
Vehicle Expenses		
Travel & Entertainment		
Repairs and Maintenance	300.00	
Supplies		
Charitable Contributions/Gifts		
Purchase of Fixed Assets		
Advertising		
Bank Charges		
Other (attach schedule) MORTGAGES	5311.00	
INS. & TAXES		
Total Business Disbursements	5611.00	
CASH - End of Month (Must equal reconciled bank statement - Attachment No. 2)		

ATTACHMENT NO. 1

OVERSIGHT		YES	NO
including period?			
"Assets" have been distributed from any account other than a debtor in possession account?			
Have any post-petition assets, including receivables, notes, or loans due, from any relatives, friends, or related parties?			
Have any assets been made or pre-petition liabilities this reporting period?			
Have any post-petition loans been received by the debtor from any party?			
Are any pre-petition payroll taxes past due?			
Are any post-petition state or federal income taxes past due?			
Are any post-petition state or local sales taxes past due?			
Are any post-petition real estate taxes past due?			
Are any amounts owed to post-petition creditors/vendors delinquent?			
Are any wage payments past due?			

If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

INSURANCE INFORMATION		YES	NO
Are real and personal property, vehicle, auto, general liability, fire, theft, worker's compensation, and other necessary insurance coverages in effect?			
Are all premium payments current?			

If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE				
TYPE OF POLICY	and CARRIER	Period of Coverage	Payment Amount and Frequency	Delinquency Amount
HOME HOODERS	ST. LOUIS			
TRAVELER	VENTURE			

Check here if United States Trustee has been listed as a Certificate Holder on all policies of insurance

INCLUDED IN MORTGAGE

DESCRIBE PERTINENT DEVELOPMENTS, EVENTS, AND MATTERS DURING THIS REPORTING PERIOD:

Estimated Date of Filing the Plan of Reorganization and Disclosure Statement: _____

FINANCIAL OPERATING REPORT...
INDIVIDUAL

ATTACHMENT NO. 2

BANK ACCOUNT RECONCILIATIONS

ATTACHED

Bank / Account Information	Account #1	Account #2	Account #3	Account #4
Name of Bank: FIRST NIAGARA				
Account Number: 007806214453				
Purpose of Account (Business/Personal): DEBTOR ACCT				
Type of Account (e.g. checking)				
1. Balance per Bank Statement				
2. ADD: Deposits not credited (attach list to this report)				
3. SUBTRACT: Outstanding Checks (attach list)				
4. Other Reconciling Items (attach list to this report)				
5. Month End Balance (Must Agree with Books)				
TOTAL OF ALL ACCOUNTS				\$

Note: Attach a copy of the bank statement and bank reconciliation for each account.

Bank / Account Name / Number	Date of Purchase	Type of Instrument	Purchase Price	Current Value

Note: Attach a copy of each investment account statement.


**FIRST
NIAGARA**

MICHAEL B SARACENO JR
DEBTOR IN POSSESSION
4507 SCHEIDYS RD
COPLAY PA 18037-2426

474 Statement Date: 04/18/16

Account Number: 7806214453
Deposit

***** Choice Checking 7806214453 *****

All Transactions by Date

Date	Description	Withdrawal	Deposit	Balance
03/18	Balance Forward ----->			9,887.70
03/22	CAPITAL ONE CARD ONLINE PMT	300.00-		9,587.70
03/30	Deposit		1,000.00	10,587.70
03/30	Withdrawal	8,896.65-		1,691.05
04/04	Deposit		1,970.00	3,661.05
04/05	Deposit		1,442.00	5,103.05
04/05	Check Num 179	1,078.00-		4,025.05
04/07	AETNA LIFE INSUR INS PYMT	140.49-		3,884.56
04/08	Deposit		2,221.00	6,105.56
04/09	Deposit		700.00	6,805.56
04/11	CHASE CHECK PYMT	85.15-		6,720.41
	Check Number: 189			
04/11	Check Num 180	397.33-		6,323.08
04/12	Check Num 194	72.96-		6,250.12
04/13	TCS TREAS 449 XXSOC SEC		1,580.49	7,830.61
04/13	Deposit		600.00	8,430.61
04/13	Check Num 191	26.82-		8,403.79
04/13	Check Num 190	18.86-		8,384.93
04/14	Deposit		500.00	8,884.93
04/18	Deposit		725.00	9,609.93

Checks in Order

Date	Number	Amount	Date	Number	Amount	Date	Number	Amount
04/05	179	1,078.00	04/13	190*	18.86	04/12	194*	72.96
04/11	180	397.33	04/13	191	26.82			

(*) Check Numbers Missing

Account Summary

Beginning	Balance	+	Deposits	+	Interest Paid	-	Withdrawals	-	Service Charge	=	Ending Balance
	9,887.70		10,738.49		.00		11,016.26		.00		9,609.93

Statement from 03/19/16 Thru 04/18/16

Paying Bank DEBITS
Document Page 8 of 12

DATE

4-3-16

PAYEES

DISCOVER CARD

\$ 18.86

BARKLEY BANK

\$ 26.82

(BANK OF AMERICA)
Small Bus. Adm.

\$ 166.75

SUSQUEHANNA BANK

\$ 416.89

WELLS FARGO

\$ 72.91

\$ 702.43

ATTACHMENT NO. 3A

CASH DISBURSEMENTS DETAILS - HOUSEHOLD

Account Number	
Purpose of Account (Personal)	
Type of Account (e.g., Checking)	

[illegible]

If any checks written this period have not been delivered to the payee, provide details, including the payee, amount, explanation for holding check and anticipated delivery date of check.

[illegible]

[illegible]

1. The first step in the process of the investigation is to identify the problem or issue that needs to be addressed. This involves gathering information about the situation and determining the scope of the investigation.

2. Once the problem is identified, the next step is to develop a plan of action. This plan should outline the objectives of the investigation, the methods to be used, and the timeline for completion.

3. The third step is to collect data. This involves gathering information from various sources, including interviews, observations, and documents. The data should be organized and analyzed to identify patterns and trends.

4. The fourth step is to interpret the data. This involves drawing conclusions from the data and identifying the causes of the problem. It is important to consider alternative explanations and to be open to new information.

5. The final step is to report the findings. This involves writing a report that summarizes the results of the investigation and provides recommendations for action. The report should be clear, concise, and easy to understand.

1. What is the main purpose of the report?

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MONTHLY OPERATING REPORT -
INDIVIDUAL

ATTACHMENT NO. 4

ACCOUNTS RECEIVABLE RECONCILIATION (Pre- & Post-Petition)		Scheduled Amount	Current Month
Accounts Receivable Beginning Balance			
Plus: Billings During the Month			
Less: Collections During the Month			
Adjustments or WriteOffs*			
Accounts Receivable Ending Balance**			

ACCOUNTS RECEIVABLE AGING (Pre- & Post-Petition)		Scheduled Amount	Current Month
0 - 30 Days			
31 - 60 Days			
61 - 90 Days			
Over 90 Days			
Total Accounts Receivable**			

* Attach explanation of any adjustment or writeoff.

** The "current month" of these two lines must equal.

POST-PETITION TAXES	Beginning Tax Liability*	Amount Withheld & or Accrued
Federal Taxes		
Withholding**		
FICA - Employee		
FICA - Employer		
Unemployment		
Income		
Other (Attach List)		
Total Federal Taxes		
State & Local Taxes		
Withholding		
Sales		
Unemployment		
Real Property		
Personal Property		
Other (Attach List)		
Total State & Local Taxes		
Total Post-Petition Taxes		

* The beginning tax liability should represent the liability from the prior month, or if this is the first report, the amount should be zero.

** Attach copies of IRS Form 6123 or your FTD coupon and payment receipt to verify payment or deposit.